

Child Abuse - DHS

232.67 Legislative findings — purpose and policy.

Children in this state are in urgent need of protection from abuse. It is the purpose and policy of this part 2 of [division III](#) to provide the greatest possible protection to victims or potential victims of abuse through encouraging the increased reporting of suspected cases of abuse, ensuring the thorough and prompt assessment of these reports, and providing rehabilitative services, where appropriate and whenever possible to abused children and their families which will stabilize the home environment so that the family can remain intact without further danger to the child.

232.68 Definitions.

The definitions in [section 235A.13](#) are applicable to this part 2 of [division III](#). As used in [sections 232.67 through 232.77](#) and [235A.12 through 235A.24](#), unless the context otherwise requires:

1. “*Child*” means any person under the age of eighteen years.
2. a. “*Child abuse*” or “*abuse*” means:
 - (1) Any nonaccidental physical injury, or injury which is at variance with the history given of it, suffered by a child as the result of the acts or omissions of a person responsible for the care of the child.
 - (2) Any mental injury to a child’s intellectual or psychological capacity as evidenced by an observable and substantial impairment in the child’s ability to function within the child’s normal range of performance and behavior as the result of the acts or omissions of a person responsible for the care of the child, if the impairment is diagnosed and confirmed by a licensed physician or qualified mental health professional as defined in [section 622.10](#).
 - (3) The commission of a sexual offense with or to a child pursuant to [chapter 709](#), [section 726.2](#), or [section 728.12, subsection 1](#), as a result of the acts or omissions of the person responsible for the care of the child or of a person who resides in a home with the child. Notwithstanding [section 702.5](#), the commission of a sexual offense under this subparagraph includes any sexual offense referred to in this subparagraph with or to a person under the age of eighteen years.
 - (4) (a) The failure on the part of a person responsible for the care of a child to provide for the adequate food, shelter, clothing, medical or mental health treatment, supervision, or other care necessary for the child’s health and welfare when financially able to do so or when offered financial or other reasonable means to do so.
(b) For the purposes of subparagraph division (a), failure to provide for the adequate supervision of a child means the person failed to provide proper supervision of a child that a reasonable and prudent person would exercise under similar facts and circumstances and the failure resulted in direct harm or created a risk of harm to the child.
(c) A parent or guardian legitimately practicing religious beliefs who does not provide specified medical treatment for a child for that reason alone shall not be considered abusing the child, however this provision shall not preclude a court from ordering that medical service be provided to the child where the child’s health requires it.
 - (5) The acts or omissions of a person responsible for the care of a child which allow, permit, or encourage the child to engage in acts prohibited pursuant to [section 725.1](#). Notwithstanding [section 702.5](#), acts or omissions under this subparagraph include an act or omission referred to in this subparagraph with or to a person under the age of eighteen years.
 - (6) An illegal drug is present in a child’s body as a direct and foreseeable consequence of the acts or omissions of the person responsible for the care of the child.
 - (7) The person responsible for the care of a child, in the presence of a child, as defined in [section 232.2, subsection 6](#), paragraph “p”, unlawfully uses, possesses, manufactures, cultivates, or distributes a dangerous substance, as defined in [section 232.2, subsection 6](#), paragraph “p”, or knowingly allows such use, possession, manufacture, cultivation, or distribution by another person in the presence of a child; possesses a product with the intent to use the product as a precursor or an intermediary to a dangerous substance in the presence of a child; or unlawfully uses, possesses, manufactures, cultivates, or distributes a dangerous substance specified in [section 232.2, subsection 6](#), paragraph “p”, subparagraph (2), subparagraph division (a), (b), or (c), in a child’s home, on the premises, or in a motor vehicle located on the premises.
 - (8) The commission of bestiality in the presence of a minor under [section 717C.1](#) by a

person who resides in a home with a child, as a result of the acts or omissions of a person responsible for the care of the child.

(9) Knowingly allowing a person custody or control of, or unsupervised access to a child or minor, after knowing the person is required to register or is on the sex offender registry under [chapter 692A](#) for a violation of [section 726.6](#).

(10) The person responsible for the care of the child has knowingly allowed the child access to obscene material as defined in [section 728.1](#) or has knowingly disseminated or exhibited such material to the child.

(11) The recruitment, harboring, transportation, provision, obtaining, patronizing, or soliciting of a child for the purpose of commercial sexual activity as defined in [section 710A.1](#).

b. “*Child abuse*” or “*abuse*” shall not be construed to hold a victim responsible for failing to prevent a crime against the victim.

2A. “*Child protection worker*” means an individual designated by the department to perform an assessment in response to a report of child abuse.

3. “*Confidential access to a child*” means access to a child, during an assessment of an alleged act of child abuse, who is alleged to be the victim of the child abuse. The access may be accomplished by interview, observation, or examination of the child. As used in [this subsection](#) and this part:

a. “*Interview*” means the verbal exchange between the child protection worker and the child for the purpose of developing information necessary to protect the child. A child protection worker is not precluded from recording visible evidence of abuse.

b. “*Observation*” means direct physical viewing of a child under the age of four by the child protection worker where the viewing is limited to the child’s body other than the genitalia and pubes. “*Observation*” also means direct physical viewing of a child aged four or older by the child protection worker without touching the child or removing an article of the child’s clothing, and doing so without the consent of the child’s parent, custodian, or guardian. A child protection worker is not precluded from recording evidence of abuse obtained as a result of a child’s voluntary removal of an article of clothing without inducement by the child protection worker. However, if prior consent of the child’s parent or guardian, or an ex parte court order, is obtained, “*observation*” may include viewing the child’s unclothed body other than the genitalia and pubes.

c. “*Physical examination*” means direct physical viewing, touching, and medically necessary manipulation of any area of the child’s body by a physician licensed under [chapter 148](#).

4. “*Department*” means the state department of human services and includes the local, county, and service area offices of the department.

5. “*Differential response*” means an assessment system in which there are two discrete pathways to respond to accepted reports of child abuse, a child abuse assessment and a family assessment. The child abuse assessment pathway shall require a determination of abuse and a determination of whether criteria for placement on the central abuse registry are met. As used in [this subsection](#) and [this part](#):

a. “*Assessment*” means the process by which the department responds to all accepted reports of alleged child abuse. An “*assessment*” addresses child safety, family functioning, culturally competent practice, and identifies the family strengths and needs, and engages the family in services if needed. The department’s assessment process occurs either through a child abuse assessment or a family assessment.

b. “*Child abuse assessment*” means an assessment process by which the department responds to all accepted reports of child abuse which allege child abuse as defined in [subsection 2](#), paragraph “a”, subparagraphs (1) through (3) and subparagraphs (5) through (10), or which allege child abuse as defined in [subsection 2](#), paragraph “a”, subparagraph (4), that also allege imminent danger, death, or injury to a child. A “*child abuse assessment*” results in a disposition and a determination of whether a case meets the definition of child abuse and a determination of whether criteria for placement on the registry are met.

c. “*Family assessment*” means an assessment process by which the department responds to all accepted reports of child abuse which allege child abuse as defined in [subsection 2](#), paragraph “a”, subparagraph (4), but do not allege imminent danger, death, or injury to a child. A “*family assessment*” does not include a determination of whether a case meets the definition of child abuse and does not include a determination of whether criteria for placement on the registry are met.

6. “*Health practitioner*” includes a licensed physician and surgeon, osteopathic physician

and surgeon, dentist, optometrist, podiatric physician, or chiropractor; a resident or intern in any of such professions; a licensed dental hygienist, a registered nurse or licensed practical nurse; a physician assistant; and an emergency medical care provider certified under [section 147A.6](#).

7. “*Mental health professional*” means a person who meets the following requirements:

a. Holds at least a master’s degree in a mental health field, including but not limited to psychology, counseling, nursing, or social work; or is licensed to practice medicine pursuant to [chapter 148](#).

b. Holds a license to practice in the appropriate profession.

c. Has at least two years of postdegree experience, supervised by a mental health professional, in assessing mental health problems and needs of individuals used in providing appropriate mental health services for those individuals.

8. “*Person responsible for the care of a child*” means:

a. A parent, guardian, or foster parent.

b. A relative or any other person with whom the child resides and who assumes care or supervision of the child, without reference to the length of time or continuity of such residence.

c. An employee or agent of any public or private facility providing care for a child, including an institution, hospital, health care facility, group home, mental health center, residential treatment center, shelter care facility, detention center, or child care facility.

d. Any person providing care for a child, but with whom the child does not reside, without reference to the duration of the care.

9. “*Registry*” means the central registry for child abuse information established in [section 235A.14](#).

10. “*Sex trafficking*” means the recruitment, harboring, transportation, provision, obtaining, patronizing, or soliciting of a person for the purpose of commercial sexual activity as defined in [section 710A.1](#).

11. “*Sex trafficking victim*” means a victim of sex trafficking.

232.69 Mandatory and permissive reporters — training required.

1. The classes of persons enumerated in [this subsection](#) shall make a report within twenty-four hours and as provided in [section 232.70](#), of cases of child abuse. In addition, the classes of persons enumerated in [this subsection](#) shall make a report of abuse of a child who is under twelve years of age and may make a report of abuse of a child who is twelve years of age or older, which would be defined as child abuse under [section 232.68, subsection 2, paragraph “a”](#), subparagraph (3) or (5), except that the abuse resulted from the acts or omissions of a person other than a person responsible for the care of the child.

a. Every health practitioner who in the scope of professional practice, examines, attends, or treats a child and who reasonably believes the child has been abused. Notwithstanding [section 139A.30](#), this provision applies to a health practitioner who receives information confirming that a child is infected with a sexually transmitted disease.

b. Any of the following persons who, in the scope of professional practice or in their employment responsibilities, examines, attends, counsels, or treats a child and reasonably believes a child has suffered abuse:

(1) A social worker.

(2) An employee or operator of a public or private health care facility as defined in [section 135C.1](#).

(3) A certified psychologist.

(4) A licensed school employee, certified para-educator, holder of a coaching authorization issued under [section 272.31](#), or an instructor employed by a community college.

(5) An employee or operator of a licensed child care center, registered child development home, head start program, family development and self-sufficiency grant program under [section 216A.107](#), or healthy opportunities for parents to experience success – healthy families Iowa program under [section 135.106](#).

(6) An employee or operator of a substance abuse program or facility licensed under [chapter 125](#).

(7) An employee of a department of human services institution listed in [section 218.1](#).

(8) An employee or operator of a juvenile detention or juvenile shelter care facility approved under [section 232.142](#).

(9) An employee or operator of a foster care facility licensed or approved under [chapter 237](#).

- (10) An employee or operator of a mental health center.
- (11) A peace officer.
- (12) A counselor or mental health professional.
- (13) An employee or operator of a provider of services to children funded under a federally approved medical assistance home and community-based services waiver.
2. Any other person who believes that a child has been abused may make a report as provided in [section 232.70](#).
3. a. For the purposes of [this subsection](#), “*licensing board*” means a board designated in [section 147.13](#), the board of educational examiners created in [section 272.2](#), or a licensing board as defined in [section 272C.1](#).
- b. A person required to make a report under [subsection 1](#), other than a physician whose professional practice does not regularly involve providing primary health care to children, shall complete two hours of training relating to the identification and reporting of child abuse within six months of initial employment or self-employment involving the examination, attending, counseling, or treatment of children on a regular basis. Within one month of initial employment or self-employment, the person shall obtain a statement of the abuse reporting requirements from the person’s employer or, if self-employed, from the department. The person shall complete at least two hours of additional child abuse identification and reporting training every five years.
- c. If the person is an employee of a hospital or similar institution, or of a public or private institution, agency, or facility, the employer shall be responsible for providing the child abuse identification and reporting training. If the person is self-employed, employed in a licensed or certified profession, or employed by a facility or program that is subject to licensure, regulation, or approval by a state agency, the person shall obtain the child abuse identification and reporting training as provided in paragraph “d”.
- d. The person may complete the initial or additional training requirements as part of any of the following that are applicable to the person:
- (1) A continuing education program required under [chapter 272C](#) and approved by the appropriate licensing board.
- (2) A training program using a curriculum approved by the director of public health pursuant to [section 135.11](#).
- (3) A training program using such an approved curriculum offered by the department of human services, the department of education, an area education agency, a school district, the Iowa law enforcement academy, or a similar public agency.
- e. A licensing board with authority over the license of a person required to make a report under [subsection 1](#) shall require as a condition of licensure that the person is in compliance with the requirements for abuse training under [this subsection](#). The licensing board shall require the person upon licensure renewal to accurately document for the licensing board the person’s completion of the training requirements. However, the licensing board may adopt rules providing for waiver or suspension of the compliance requirements, if the waiver or suspension is in the public interest, applicable to a person who is engaged in active duty in the military service of this state or of the United States, to a person for whom compliance with the training requirements would impose a significant hardship, or to a person who is practicing a licensed profession outside this state or is otherwise subject to circumstances that would preclude the person from encountering child abuse in this state.
- f. For persons required to make a report under [subsection 1](#) who are not engaged in a licensed profession that is subject to the authority of a licensing board but are employed by a facility or program subject to licensure, registration, or approval by a state agency, the agency shall require as a condition of renewal of the facility’s or program’s licensure, registration, or approval, that such persons employed by the facility or program are in compliance with the training requirements of [this subsection](#).
- g. For peace officers, the elected or appointed official designated as the head of the agency employing the peace officer shall ensure compliance with the training requirements of [this subsection](#).
- h. For persons required to make a report under [subsection 1](#) who are employees of state departments and political subdivisions of the state, the department director or the chief administrator of the political subdivision shall ensure the persons’ compliance with the training requirements of [this subsection](#).

232.70 Reporting procedure.

1. Each report made by a mandatory reporter, as defined in [section 232.69, subsection 1](#), shall be made both orally and in writing. Each report made by a permissive reporter, as

defined in [section 232.69, subsection 2](#), may be oral, written, or both.

2. The employer or supervisor of a person who is a mandatory or permissive reporter shall not apply a policy, work rule, or other requirement that interferes with the person making a report of child abuse.

3. The oral report shall be made by telephone or otherwise to the department of human services. If the person making the report has reason to believe that immediate protection for the child is advisable, that person shall also make an oral report to an appropriate law enforcement agency.

4. The written report shall be made to the department of human services within forty-eight hours after such oral report.

5. Upon receipt of a report, the department shall do all of the following:

a. Immediately make a determination as to whether the report constitutes an allegation of child abuse as defined in [section 232.68](#).

b. Notify the appropriate county attorney of the receipt of the report.

6. The oral and written reports shall contain the following information, or as much thereof as the person making the report is able to furnish:

a. The names and home address of the child and the child's parents or other persons believed to be responsible for the child's care;

b. The child's present whereabouts if not the same as the parent's or other person's home address;

c. The child's age;

d. The nature and extent of the child's injuries, including any evidence of previous injuries;

e. The name, age and condition of other children in the same home;

f. Any other information which the person making the report believes might be helpful in establishing the cause of the injury to the child, the identity of the person or persons responsible for the injury, or in providing assistance to the child; and

g. The name and address of the person making the report.

7. A report made by a permissive reporter, as defined in [section 232.69, subsection 2](#), shall be regarded as a report pursuant to [this chapter](#) whether or not the report contains all of the information required by [this section](#) and may be made to the department of human services, county attorney, or law enforcement agency. If the report is made to any agency other than the department of human services, such agency shall promptly refer the report to the department of human services.

8. Within twenty-four hours of receiving a report from a mandatory or permissive reporter, the department shall inform the reporter, orally or by other appropriate means, whether or not the department has commenced an assessment of the allegation in the report.

9. If a report would be determined to constitute an allegation of child abuse as defined under [section 232.68, subsection 2](#), paragraph "a", subparagraph (3) or (5), except that the suspected abuse resulted from the acts or omissions of a person other than a person responsible for the care of the child, the department shall refer the report to the appropriate law enforcement agency having jurisdiction to investigate the allegation. The department shall refer the report orally as soon as practicable and in writing within seventy-two hours of receiving the report.

10. If the department has reasonable cause to believe that a child under the placement, care, or supervision of the department is, or is at risk of becoming, a sex trafficking victim, the department shall do all of the following:

a. Identify the child as a sex trafficking victim or at risk of becoming a sex trafficking victim and include documentation in the child's department records.

b. Refer the child for appropriate services.

c. Refer the child identified as a sex trafficking victim, within twenty-four hours, to the appropriate law enforcement agency having jurisdiction to investigate the allegation.

232.76 Publicity, educational, and training programs.

1. The department, within the limits of available funds, shall conduct a continuing publicity and educational program for the personnel of the department, persons required to report, and any other appropriate persons to encourage the fullest possible degree of reporting of suspected cases of child abuse. Educational programs shall include but not be limited to the diagnosis and cause of child abuse, the responsibilities, obligations, duties, and powers of persons and agencies under [this chapter](#) and the procedures of the department and the juvenile court with respect to suspected cases of child abuse and disposition of actual cases.

2. a. For the purposes of [this subsection](#), in addition to the definition in [section 232.68](#), a “*child protection worker*” also includes any employee of the department who provides services to or otherwise works directly with children and families for whom child abuse has been alleged.

b. The training of a child protection worker shall include but is not limited to the worker’s legal duties to protect the constitutional and statutory rights of a child and the child’s family members throughout the child or family members’ period of involvement with the department beginning with the child abuse report and ending with the department’s closure of the case. The curriculum used for the training shall specifically include instruction on the fourth amendment to the Constitution of the United States and parents’ legal rights.